## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for

| maintenance fee notificatio  | ns.                         | —————————————————————————————————————— | a) specifying a new cone.   | spondence address, a  | indor (b) indicating a sep   | MARC TEE ADDRESS 101         |  |
|--|-----------------------------|--|---|---|------------------------------|------------------------------|--|
| CURRENT CORRESPONDENC  | CE ADDRESS (Note: Use Ble   | ock 1 for any change of address)       | Fee   | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.                 |                              |                              |  |
| OLIFF & BERRIDGE, PLC P.O. BOX 320850 ALEXANDRIA, VA 22320-4850  |                             |  | 氢   | Certi   | ficate of Mailing or Trans   |                              |  |
|  |                             | (A)                                    |   |   |                              | (Depositor's name)           |  |
| & TRADEN   |                             |  | Mr.   |   |                              | (Signature)                  |  |
|  |                             |  |   |   |                              | (Date)                       |  |
| APPLICATION NO.  | FILING DATE                 |  | FIRST NAMED INVENTOR  |   | ATTORNEY DOCKET NO.          | CONFIRMATION NO.             |  |
| 09/889,372   | 08/10/2001                  |  | Jun Nakagawa  |   | 110106                       | 2666                         |  |
| APPLN. TYPE  |                             |  |   | r   |                              |                              |  |
|  | SMALL ENTITY                | ISSUE FEE DUE<br>\$1510                | PUBLICATION FEE DUE   | PREV. PAID ISSUE  |                              |                              |  |
| · · · · · · · · · · · · · · · · · · ·  | nonprovisional NO  EXAMINER |  | \$0<br>CLASS-SUBCLASS   | \$0 \$1510<br>88/11/2010 SMOHAMM1 00000042 09889372 09/01/2010  |                              | 9889372                      |  |
|  |                             | ART UNIT                               | 345-426000  | 01 FC:1501  |                              | 1510.00 OP                   |  |
| PAPPAS, PETER-ANTHONY  1. Change of correspondence address or indication   |                             |  | <u>r·                                    </u>   | satest front page list  |                              | <del></del>                  |  |
| CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.   |                             |  | (1) the names of up to<br>or agents OR, alternative<br>(2) the name of a single<br>registered attorney or a<br>2 registered patent atto   | For printing on the patent front page, list  the names of up to 3 registered patent attorneys agents OR, alternatively,  the name of a single firm (having as a member a gistered attorney or agent) and the names of up to egistered patent attorneys or agents. If no name is ted, no name will be printed. |                              |                              |  |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Namco Bandai Games Inc.  Tokyo, Japan  |                             |  |   |   |                              |                              |  |
| Please check the appropriate assignee category or categories (will not be printed on the patent):  |                             |  |   |   |                              |                              |  |
| 4a. The following fee(s) are submitted:  State   Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies  |                             |  | b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed. Check 231161 \$1510  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0461 (enclose an extra copy of this form). |   |                              |                              |  |
| 5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  |                             |  |   |   |                              | FR 1.27(g)(2).               |  |
| NOTE: The Issue Fee and Printerest as shown by the reco  | ublication Fee (if requ     | ited) will not be accepted             | from anyone other than the  | ne applicant; a registe   | red attorney or agent; or th | e assignee or other party in |  |
| Authorized Signature   |                             |  |   | Date Augus  | t 10, 2010                   |                              |  |
| Typed or printed name Stephen J. Pachol, IV  |                             |  | Registration No. 62,487   |   |                              |                              |  |
| This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. |                             |  |   |   |                              |                              |  |

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.